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Bib Data Sheet

CONFIRMATION NO. 6421

SERIAL NUMBER 09/692,956	FILING DATE 10/20/2000 RULE	CLASS 264	GROUP ART UNIT 1732	ATTORNEY DOCKET NO. 13988
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APPLICANTS

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**** CONTINUING DATA****** FOREIGN APPLICATIONS**

FRANCE 9913202 10/22/1999

IF REQUIRED, FOREIGN FILING LICENSE GRANTED**** 02/07/2001**

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY FRANCE	SHEETS DRAWING 2	TOTAL CLAIMS 7	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

ADDRESS

Scully Scott Murphy & Presser
 400 Garden City Plaza
 Garden City, NY
 11530

TITLE

Process for manufacturing a flexible sleeve for a prosthesis or orthosis, preform used in this process and flexible sleeve thus obtained

FILING FEE

RECEIVED
1175

FEES: Authority has been given in Paper
 No. _____ to charge/credit DEPOSIT ACCOUNT
 No. _____ for following:

- ☐ All Fees
- ☐ 1.16 Fees (Filing)
- ☐ 1.17 Fees (Processing Ext. of time)
- ☐ 1.18 Fees (Issue)
- ☐ Other _____